



EVIDENCE TA BRIEF:

Measures and Strategies around Care Coordination and WIC Services

QUERY

Identifying measures and best practices around Care Coordination & WIC Services.

This report is designed to act as a conversation starter. The MCH Evidence team is available to examine any portions of this report in more detail. Please do not hesitate to reach out for further discussion.

Included in this report:

- **SPMs and ESMs developed by other states**
- **Priorities** from State Action Plans
- **Evidence-based strategies** pulled from both AMCHP's Innovation Hub and What Works for Health
- **Evidence-based resources** drawn from the MCH Digital Library

State Performance Measures. These SPMs have been developed by other states to address Care Coordination and WIC Services. You can review the SPMs to see if any resonate with your goals. Evidence Center staff are available to talk through how you could modify select SPMs to serve your needs.

State	SPM
AL	Increase the capacity of families to connect CYSHCN to the health and human services they require for optimal behavioral, developmental, health, and wellness outcomes through our Care Coordination Program
RI	Percent of parents of CSHCN reporting effective care coordination for their child
VI	Cross-Cutting (early and Continuous Screening): Percent of infants who are diagnosed with a newborn screening disorder that are referred to care coordination services in the CYSHCN program
ME	Percent of children with special health care needs who receive effective care coordination, among those who need it
MI	Percent of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85 th percentile
TN	Percent of WIC infants breastfeeding at six months

Evidence-based Strategy Measures. These ESMs have been chosen by other states to address Care Coordination and WIC Services. You can review the ESMs to see if any resonate with your goals. Evidence Center staff are available to talk through how you could modify select ESMs to serve your needs.

State	ESM
ME	Number of women referred to well-woman visits by social service providers (WIC and home visiting)
NM	Percent of expectant families identified through WIC or Medicaid and connected to services in key geographic areas
DC	Number of women referred for an annual well women visit by a perinatal program
MI	Number of WIC sites where oral health education is given to program participants by ROHCs
HI	Percent of Women, Infants, and Children (WIC) infants ever breastfed
MA	Percent of WIC participants receiving services from a Breastfeeding Peer Counselor who exclusively breastfed for at least three months
ME	Percent of Public Health Nurses, WIC and Maine Families Home Visitors trained as Certified Lactation Counselors
AR	Percent of infants enrolled in the WIC program who have ever been breastfed
MN	Percent of births delivered at MDH Breastfeeding-Friendly Maternity Centers
CT	Number of pregnant and postpartum WIC clients served by breastfeeding peer counselors
NC	Number of eligible WIC participants who receive breastfeeding peer counselor services
TN	WIC telehealth services implemented in rural areas
UT	The percentage of eligible pregnant and postpartum WIC participants who received at least one contact from a WIC Breastfeeding Peer Counselor
DC	Number of women referred for breastfeeding peer counseling support
GA	Number of MIECHV and Healthy Start women who are referred to WIC services
TN	Number of credentialed lactation professionals within WIC
TN	WIC Breastfeeding Buddy Program piloted in three Simple Counties
AR	Percent of women enrolled in the WIC Plus Baby and Me Program who place their infant to sleep on their back
ME	Percent of WIC participants who report always placing their baby on his/her back to sleep
AL	Percent of WIC prenatal participants placing their infants to sleep on their backs
AK	Number of maternity care providers and WIC staff participating in Alaska Breastfeeding initiative trainings with information about safe sleep
MA	Percent of infants and children enrolled in WIC who are monitored using the Learn the Signs Act Early checklist
AR	Conduct outreach to families on availability and benefits of the medical home
NM	The number of medical providers who have participated in a Quality Improvement initiative to improve coordination of care for CYSHCN
NE	The number of CYSCHN families who have contact with a Parent Resource Coordinator
CT	Percent of CYSHCN who have a comprehensive care plan in place as evidence that they are receiving care in a well-functioning system
UT	Percent of children with special health care needs population served by the Bureau who have documented care coordination follow up as part of a medical home model of care

State and Jurisdictional Strategies related to Care Coordination and WIC Services

State	Priority Needs	Strategies
ME	Improve care coordination for children and families with special health care needs	<ul style="list-style-type: none"> • Increase provider awareness of available care coordination resources. • Increase access to care coordination for families.
NV	Improve care coordination among adolescents	<ul style="list-style-type: none"> • Collaborate with public and private partners to provide adolescents, ages 12 through 17, with information on the benefits available and link them to appropriate health care coverage options • Collaborate with public and private partners to conduct outreach, education, and eligibility assistance to promote utilization of family planning and link women to appropriate health services, vaccinations, screenings (breast and cervical cancer, substance use/misuse, behavioral/mental health, postpartum depression, etc.), LARC, and use of 1-key question • Collaborate with public and private partners on activities focused on teen pregnancy prevention, bullying, rape and sexual assault prevention, suicide, and other factors that negatively impact health • Coordinate with partners and local health authorities to enhance the quality of adolescent clinic environments
RI	Ensure effective Care Coordination for CSHCN	<ul style="list-style-type: none"> • Promote patient centered medical homes for CSHCN • Promote a web-based application to address effective care coordination in the Medical Home Portal
SC	Improve care coordination for children and youth with special health care needs.	<ul style="list-style-type: none"> • Collaborate with the Pediatric Advisory Committee to develop and disseminate training for pediatricians on appropriate communication re: abnormal NBS test results and findings to families. • Identify and eliminate barriers for families' accessing and establishing a medical home for CYSHCN.

AMCHP's Innovation Hub

Title	Link	Category
Get Healthy Together: WIC Staff and Clients Moving Toward Healthier Lifestyles	https://www.amchpinnovation.org/database-entry/get-healthy-together-wic-staff-and-clients-moving-toward-healthier-lifestyles/	Promising
Oregon Care Coordination Program (CACOON)	https://www.amchpinnovation.org/database-entry/oregon-care-coordination-program-cacoon/	Promising
Internatal Care Program (ICP)	https://www.amchpinnovation.org/database-entry/internatal-care-program-icp/	Promising
Kern County (CA) Medically Vulnerable Care Coordination Project	https://www.amchpinnovation.org/database-entry/kern-county-ca-medically-vulnerable-care-coordination-project/	Promising
Family Navigator Network	https://www.amchpinnovation.org/database-entry/family-navigator-network/	Emerging
Care Connection for Children	https://www.amchpinnovation.org/database-entry/care-connection-for-children/	Emerging
Minnesota Care Coordination Systems Assessment and Action Planning	https://www.amchpinnovation.org/database-entry/minnesota-care-coordination-systems-assessment-and-action-planning/	Emerging
What Works for Health		
Culturally adapted health care	https://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/strategies/culturally-adapted-health-care	Scientifically Supported
Patient Navigators	https://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/strategies/patient-navigators	Scientifically Supported
Fruit & Vegetables Incentive Programs	https://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/strategies/fruit-vegetable-incentive-programs	Scientifically Supported
WIC & Senior Famers' Market Nutrition Programs	https://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/strategies/wic-senior-farmers-market-nutrition-programs	Some Evidence
Preconception Education Interventions	https://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/strategies/preconception-education-interventions	Some Evidence
Rural Transportation Services	https://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/strategies/rural-transportation-services	Expert Opinion

Resources for Increasing Workforce Capacity around Care Coordination and WIC Services

MCH Bank of Evidence-based Strategies and Tools: <https://www.mchevidence.org/tools/strategies/search/>

Tailoring nutrition services: Development of a cultural toolkit for Iowa WIC staff. This fact sheet describes a toolkit developed by the Iowa WIC program to increase WIC staff knowledge of the cultural traditions of WIC clientele. The toolkit includes information to help WIC counselors recognize the food-related practices and beliefs of different cultures. It also provides suggestions for adapting counseling methods based on traditional communication styles and interpersonal behaviors, such as body language, vocal volume, distance, and touch. It provides contact information for obtaining a copy of the toolkit.

<https://georgetown.app.box.com/file/712282355829>

Maternal characteristics of prenatal WIC receipt in the United States, 2016. This report describes prenatal Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) receipt in the United States in 2016 by state and by maternal age, race and Hispanic origin, and education. For each topic, key points are provided, and bar graphs illustrate statistical information.

<https://www.cdc.gov/nchs/data/databriefs/db298.pdf>

Organizing care and relationships for families: Care map. This resource provides information on the care map application, a tool to assist families and the professionals they partner with to coordinate and plan health care for children with special health care needs and for all children. The website includes a how-to guide for families and a guide for professionals supporting families. This resource won the 2020 Care Coordination for Children with Special Health Care Needs Challenge sponsored by the Maternal and Child Health Bureau.

<https://www.childrenshospital.org/integrated-care-program/care-mapping>

How states use the national standards for CYSHCN to strengthen Medicaid managed care for children with special health care needs. This fact sheet provides examples of state actions to use the National Standards for Children and Youth with Special Health Care Needs (CYSHCN) to strengthen their managed care systems for CYSHCN. Topics include analyzing and enhancing specialized managed care plans, providing a framework to design and strengthen care delivery systems, strengthening contract language to address the needs of CYSHCN, and improving care coordination and transition to adult care. The various state examples outlined here resulted from a 12-month learning collaborative facilitated by NASHP, in partnership with the Association of Maternal & Child Health Programs (AMCHP), with support from the Lucile Packard Foundation for Children's Health (LPFCH).

<https://www.nashp.org/how-states-use-the-national-standards-for-cyshcn-to-strengthen-medicaid-managed-care-for-children-with-special-health-care-needs/>

National healthcare quality and disparities report. The National Healthcare Quality and Disparities Report assesses the performance of our healthcare system and identifies areas of strengths and weaknesses, as well as disparities, for access to healthcare and quality of healthcare. Quality is described in terms of six priorities: patient safety, person-centered care, care coordination, effective treatment, healthy living, and care affordability. The report is based on more than 250 measures of quality and disparities covering a broad array of healthcare services and settings. State snapshots, chartbooks on specific topics, and data tools are also available.

<https://www.ahrq.gov/research/findings/nhqrdr/nhqrdr18/index.html>